UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 CFR 1.53(b)			ATTORNEY DOCKET 86421CPK Customer No. 01333		
To: Commissioner for Patents			Express Mail Label No.		
P.O. Box 1450					
Alexandria, VA. 22313-1450			EV2935292		
REFLECTIVE CHIRAL-NEMATIC LIQUID			Date:	Tovember 21, 200	3
CRYSTAL DISPLAY WITH BROADBAND				,	0
REFLECTION					E.8
First Named Inventor (or Application Identifier):					ა. დ
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Krishnan Chari, et al					17497 U.S.F 10/71890
Enclosed are:  1. X Specification			6. X	Assignment of the invention to	
1. A specification			6. X	Assignment of the invention to Eastman Kodak Company	
2. 4 Sheet(s) of drawing	<b>g(s)</b>		7.	Certified copy of a priority	
3. X Information Disclosure Statement Under 37 CFR 1.97.			8.	Associate Power of Attorney	
4. Combined Declaration for Patent Application and Power of Attorney:					
4a. X New 4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed)					
5. Incorporation by Reference (useable if Box 4b is 9. Deletion of Inventor(s).					
checked) The entire disclosure of the prior application, from Signed statement attached deleting inventor(s) named					
which a copy of the oath or declaration is supplied under Box 4b, in the prior application, see 37 CFR 1.63(d)(2) and					
is considered as being part of the disclosure of the accompanying 1.33(b). application and is hereby incorporated by reference therein.					
10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1,					
after the title, by inserting the following:					
CROSS REFERENCE TO RELATED APPLICATION  Reference is made to and priority claimed from U.S. Provisional Application Serial No.,					
filed, entitled.					
If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:					
11. Continuation Divisional Continuation-in-part (CIP) of prior application No:					
12. X Please address all written communications to Paul A. Leipold, Patent Legal Staff, Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.					
Please Direct all telep				01.	
The filing fee has been calculate	ed as shown below:				
FOR:	NO. FILED	NO. EXTR	A RATE	FEE	
BASIC FEE TOTAL CLAIMS	20 - 20 =	0	x 18 =	\$ 770	
INDEPENDENT CLAIMS	3 - 3 =	0	x 86 =	\$ 0 \$ 0	
MULTIPLE DEPENDEN	T CLAIM PRESEN	TED	+ 29		
		•	ТОТ	<b>AL</b> \$ 770	••
X Please charge my Eastman Kodak Company Deposit Account No. <u>05-0225</u> in the amount of \$ 770					
A duplicate copy of this sheet is enclosed					
X The Commissioner is hereby authorized to charge any additional filing fees required under					
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. <u>05-0225</u> .  A duplicate copy of this sheet is enclosed.					
( 1/ku//					
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Telephone: 585 722-0452 Registration No. 30,721					
Facsimile: 585 477-1148			-		